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	Substitute for form 1449/PTO	Complete if Known		
		Application Number		
	INFORMATION DISCLOSURE	Filing Date		
	- · · · · · · · ·	First Named Inventor	Cheryl E. Zemont	
	STATEMENT BY APPLICANT	Art Unit		
	(Use as many sheets as necessary)	Examiner Name		
	Sheet 1 of 1	Attorney Docket Number	0502.003	

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (F Irrown)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Unes, When Relevant Passages or Relevan Figures Appear	
MB		^{US-} Des. 344,591	02/22/1994	Zhuang		
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Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ Number ⁴ "Kind Code ⁸ (# known)	Publication	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
	110.		Date MM-DD-YYYY	Applicant of Cited Document		
MB		WO 89/05622	06/29/1989			
MB		DE 198 15 302 A 1	10/07/1999			
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Examiner Signature	TVB	<u> </u>	Date Considered	6/	15/04

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